

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2007 08:00 AM
Secretary of State

DOCUMENT # N98000004525

1. Entity Name

TERRAVERDE 10 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

17144-2 RAVENS ROOST
#2
FORT MYERS FL 33908
US

17144-2 RAVENS ROOST
#2
FORT MYERS FL 33908
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1073508

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SEDLAK, DOROTHEA
17144-2 RAVENS ROOST
FORT MYERS FL 33908

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Dorothea A Sedlak

2/12/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PDMD ☐ Delete
NAME SEDLAK, DOROTHEA
STREET ADDRESS 17144-2 RAVENS ROOST
CITY-ST-ZIP FORT MYERS FL 33908

TITLE TSDM ☐ Delete
NAME THOMPSON, EILEEN
STREET ADDRESS 18138-1 RAVENS ROOST
CITY-ST-ZIP FORT MYERS FL 33908

TITLE DM ☐ Delete
NAME DUBE, RONALD
STREET ADDRESS 17144-12 RAVENS ROOST
CITY-ST-ZIP FORT MYERS FL 33908

TITLE DM ☐ Delete
NAME BACON, JEROME
STREET ADDRESS 17138-11 RAVENS ROOST
CITY-ST-ZIP FORT MYERS FL 33908

TITLE VDMD ☐ Delete
NAME TOPP, PATRICIA
STREET ADDRESS 17138-4 RAVENS ROOST
CITY-ST-ZIP FORT MYERS FL 33908

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 02/26/07-80070-007 61.25
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Dorothea A Sedlak

2/12/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR